

JAN 13 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: Lincoln D. Donovan Eaton Case No.: 03-EDP-234

Applicant(s): Robert W. Mueller

Serial No.: 10/733,145 Group Art Unit: 2832

Filed: December 11, 2003 In Response to Paper No.: 091304

Title: Slot Motor Including Legs Engaging Openings of Circuit Breaker Housing and
Electrical Switching Apparatus Employing the Same

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January 13, 2005

Commissioner of Patents and Trademarks
Washington, DC 20231

SIR:

In response to the Office Action October 18, 2004, please amend the above-identified application as follows:

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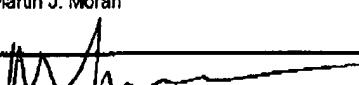
PTO/SB/21 (08-03)

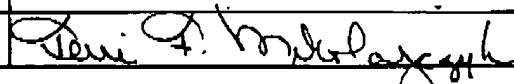
Approved for use through 08/30/2003, OMB 0651-0031
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/733,145
		Filing Date	December 11, 2003
		First Named Inventor	Robert W. Mueller
		Art Unit	2832
		Examiner Name	Lincoln D. Donovan
Total Number of Pages in This Submission	6	Attorney Docket Number	03-EDP-234

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Martin J. Moran
Signature	
Date	January 13, 2005

CERTIFICATE OF TRANSMISSION/MAILING		
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Typed or printed name	Terri F. Mikolajczyk	
Signature		Date 1/13/05

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